Substitute for form 1449A/PTO	Complete If Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT *(Use as many sheets as necessary)*	**Application Number**	10/670,981
	Filing Date	September 25, 2003
	First Named Inventor	Martin, Robert
	Group Art Unit	3679
	Examiner Name	Unknown *Nicolson*
Sheet 1 of 1	**Attorney Docket No: KMG1097**	

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Examiner Initials*	Cite No¹	Include name of the author (In CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, Journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²

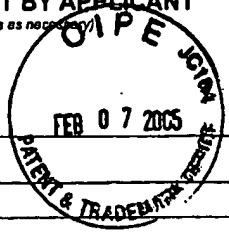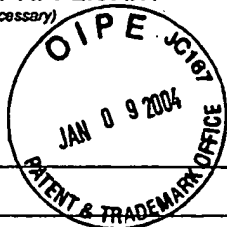| EXAMINER		DATE CONSIDERED	5/13/05

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(Use as many sheets as necessary)

Sheet 1 of 1

Complete if Known	
Application Number	10/670981
Filing Date	September 25, 2003
First Named Inventor	Flynn, Harry
Group Art Unit	Unknown 3679
Examiner Name	Unknown Nicholson

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